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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/620,149	
	Filing Date	July 14, 2003	
	First Named Inventor	Christopher J. SAVOIE	
	Art Unit	1633	
	Examiner Name	Robert M. Kelly	
Total Number of Pages in This Submission	4	Attorney Docket Number	058002-5001 US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Notice of Appeal <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none">• Return postcard•
<input type="checkbox"/> Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0310.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Morgan, Lewis & Bockius LLP Ada O. Wong, Reg. No. 55,740
Signature	
Date	June 29, 2006

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Judi Stillwell		
Signature		Date	June 29, 2006